A Family’s Guide to Funding Early Intervention Services in Arizona
A zEIP system of payments overview

Each time the Arizona Early Intervention Program (AzEIP) gets your consent to provide early intervention services; the program is required under Part C of the federal Individuals with Disabilities Education Act (IDEA) to give you a copy of the Child and Family Rights brochure that explains parental rights to mediation, due process and the State complaint process. In addition, the State is required to provide information about no-cost protections regarding the system of payments for early intervention services.

The AzEIP System of Payments policies (within Chapter 9, Financial Matters) describe how your insurance, whether public and/or private, may be used to pay for early intervention services provided to your family through the Arizona State Schools for the Deaf and the Blind (ASDB), the Department of Economic Security/ Arizona Early Intervention Program (DES/AzEIP), and/or the DES/ Division of Developmental Disabilities (DDD). By law, ASDB, DES/AzEIP and DDD, together known as AzEIP Service Providing Agencies, must explore all possible funding sources prior to using State or Federal funds. Arizona’s system of payments for early intervention services includes public benefits or insurance and private insurance. It does not include family fees assessed an AzEIP Service Providing Agency.

This brochure is designed to share important information about how these financial policies may affect you, your right to consent or decline consent, and how your decision to consent or decline consent may affect your early intervention experience.

Definitions

1. AzEIP Service Providing Agencies are those state agencies identified in A.R.S. § 41-2022—that provide early intervention services under IDEA, Part C: the Arizona Department of Economic Security and the Arizona State Schools for the Deaf and the Blind. The Arizona Department of Economic Security provides early intervention services through the DES, Arizona Early Intervention Program (DES/AzEIP) and the DES, Division of Developmental Disabilities (DES/ DDD).

2. Consent includes informed permission to utilize Private Insurance and Public Insurance and Benefits, and to share personally identifiable information for the purposes of this billing.
3. Responsible person(s) is defined as (a) the biological or adoptive parent(s) or (b) the guardian(s) of a child enrolled in the Arizona Early Intervention Program.

What services under Part C of IDEA are provided at public expense and at no cost to you and your child?

(1) any of the activities related to initial referral to AzEIP, determining a child’s eligibility or developing the Individualized Family Service Plan;

(2) evaluation and assessment (to determine if a child is eligible for services/supports and to identify strengths and needs in order to plan for appropriate services);

(3) service coordination;

(4) administrative and coordination activities related to:
   a. development, review, and evaluation of IFSPs;
   b. teaming activities on behalf of a family;
   c. transition conferences; and
   d. implementing procedural safeguards, including dispute resolution.

What services are subject to family fees?

AzEIP Service Providing Agencies do not charge family fees for any early intervention services.

What if I am mistakenly charged fees, such as fees other than health insurance premiums?

Your service coordinator must inform you that you have a right to challenge fees, such as fees other than health insurance premiums, which are mistakenly charged to you, using the following due process protections:

(1) File a formal complaint with DES/AzEIP;

(2) Request and/or participate in mediation; and/or

(3) Request a due process hearing.

See the Child and Family Rights Handbook for additional information regarding these due process rights.
General information about health insurance

Even though there are no family fees for services provided through AzEIP, the State must ensure that all potential funding sources are used to pay for early intervention services, including public and private health insurance. There will be no cost to you, other than your insurance premium, if you provide consent to use your private insurance.

1. Who decides if my health insurance can be used to pay for early intervention services?

You, as the responsible person(s), decide whether your insurance may be used. AzEIP must obtain your written consent to use your child’s public or private insurance, which includes the disclosure of your and/or your child’s personally identifiable information (such as your name and address) for billing purposes.

With your consent, AzEIP will attempt to utilize insurance to pay for:

a. evaluation (which may only be used if there is no cost to you)

b. the initial provision of early intervention services identified on the Individualized Family Service Plan (IFSP); and

c. each increase in frequency, length, duration, or intensity of an early intervention service on the IFSP (If you have private insurance, a separate consent must be obtained for every increase in the service).

2. What happens if I decline to use my insurance for early intervention services?

Early intervention services will not be denied or delayed because you have declined consent to use your public or private insurance.

3. What if I change my mind about using my insurance or sharing my personal information for billing?

You may give or withdraw consent to use insurance and benefits and/or share personally identifiable information for billing purposes, at any time. If you withdraw consent after initially giving consent, the effective date for the withdrawal is the date that your written withdrawal is received by your service coordinator.
4. If I consent to use my insurance, who bills the insurance company or health plan?

You provide written consent to bill insurance for the early intervention services provided to your family. The AzEIP Team-Based Early Intervention Services (TBEIS) contracted provider of services, either the program or an individual provider, will bill your insurance. DES/AzEIP AND DES/DDD do not bill insurance. ASDB does not bill your insurance for services provided by the AzEIP TBEIS contracted provider. However, for families served by ASDB and who have provided consent to use insurance, ASDB bills the appropriate insurance company, and tracks and collects payment, for other early intervention services, when applicable.

5. What happens if I have public and private insurance and I want to consent for one, but not the other?

Some public insurance plans require that any other insurance, typically private, be billed before the public insurance resources are used. Therefore, if you provide consent to use the child’s public insurance, but not the child’s private insurance, the public insurance may deny payment due to failure to bill private insurance. In this instance, the end result is that the AzEIP Service Providing Agencies and its contractors will not be able to successfully use insurance to pay for early intervention services.

Also, if your child is enrolled in DES/DDD and the Arizona Long Term Care System (ALTCS), DES/DDD is required to access private insurance before using Title XIX, ALTCS funding for children enrolled in ALTCS. If your child is ALTCS eligible, you must provide consent to use your private health insurance, if you have it, and the public insurance of ALTCS, in order to become or stay enrolled in ALTCS and receive services through DES/DDD. If your child is eligible for ALTCS, and you decline consent to use your insurance, your child will be not be able to participate in ALTCS and DDD, and your family will receive early intervention services through other early intervention sources.

Private health insurance

1. What happens with my co-pay or deductible when you use my health insurance?

You may be responsible for premiums and long-term costs such as the loss of benefits because of annual or lifetime health insurance coverage caps and family cost participation fees. AzEIP (including their employees, contractors, and subcontractors) will not collect co-pays and families are not charged for deductibles for any early intervention services.
If insurance denies a claim, because you have not yet met your deductible, your early intervention program will bill and be paid by the AzEIP Service Providing Agency. The amount that insurance would have paid had your deductible been met is often applied toward your deductible, even though the AzEIP Service Providing Agency is paying for the service.

2. Why would I consider using my private insurance to pay for early intervention services?

If you provide written consent to use your insurance and insurance pays for some or all of the services, the AzEIP Service Providing Agency’s cost for the provision of early intervention services to your family is reduced or eliminated. Families are responsible for any insurance premiums. However, families are not charged family fees, co-payments are not collected and families are not charged deductibles for any Early Intervention Service.

3. What happens if my private insurance only covers a limited number or amount of one or more services?

If your family reaches the maximum allowable units or level of service covered by your insurance for a specified period, the AzEIP Service Providing Agency will pay for the remaining IFSP services, unless another funding source is identified. Your services will not be affected.

Public health insurance

1. What is public insurance?

Public insurance refers to the healthcare coverage provided by Arizona’s Medicaid agency, the Arizona Healthcare Cost Containment System (AHCCCS). Examples of public insurance in Arizona include AHCCCS’ health insurance, KidsCare, the Arizona Long-term Care System (ALTCS), and the Comprehensive Medical and Dental Program (CMDP).

2. Can I be required to enroll in public insurance, like AHCCCS, or public benefits?

You cannot be required to sign up for or enroll in public benefits or insurance (such as AHCCCS) in order to receive early intervention services.
3. Does the early intervention program or provider need my consent before using my public health insurance to pay for services?

AzEIP requires consent to use public insurance for all families before the Early Intervention Program or provider may access your public insurance to pay for services. The consent also includes your consent to share certain information about you or your child, such as your name, date birth, and identification number, before the insurance is billed.

The law requires that consent to use your or your child’s public benefit or insurance be obtained if:

A. you or child is not already enrolled in AHCCCS; or

B. the use of the child’s or responsible person’s public benefit/insurance would:

(1) decrease available lifetime coverage or any other insured benefit for the child or responsible person(s);

(2) result in you paying for services that would otherwise be covered by the public benefit/insurance;

(3) result in any increase in premiums or discontinuation of public benefits/insurance for that child or responsible person(s); or

(4) risk loss of eligibility for the child or you for home and community-based waivers based on aggregate health-related expenditures.

None of the events in B., above will occur for a family when using AHCCCS; however, this could change in the future. Check with your service coordinator.

4. What happens if I do not consent for the early intervention program or provider to use my public health insurance or benefits?

Your early intervention program provider uses public insurance or benefits to help pay for the early intervention services. If you do not consent, you will still receive your early intervention services. If you are enrolled in the Division of Developmental Disability (DDD)’s Arizona Long-Term Care System (ALTCS) and you do not consent to use ALTCS to pay for the services, you will no longer be able to be served by DDD, but will change to another early intervention program to provide your services.
Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request. • Disponible en español en línea o en la oficina local.